Medicaid Covered Drugs for Part D Dual Eligibles

Over-the-Counter (OTC) Drugs:

OTC drugs covered for Medicare Part D Dual Eligible clients are the same as those covered for non-dual clients. Click here for the Medicaid Covered Over the Counter Drug List.

Drugs for the treatment of Cough and Cold symptoms:

Cough and Cold products covered for Medicare Part D Dual Eligible clients are the same as those covered for non-dual clients. Click here for the List of Covered Cough / Cold Products

Weight Loss:

No weight loss products are covered.

Anorexia:

No products are covered for treatment of anorexia.

Fertility:

No fertility products are covered.

Cosmetic:

No cosmetic products are covered.

Barbiturates:		
Amobarbital sodium for injection (Prior Authorization Required)		
Butalbital – acetaminophen capsules and tablets		
Butalbital – acetaminophen – caffeine capsules, tablets, elixir, and solution		
Mephobarbital tablets		
Phenobarbital tablets		
Phenobarbital elixir		
Phenobarbital sodium for injection		
Secobarbital sodium capsules		

Benzodiazepines:

Alprazolam orally disintegrating tabs (Prior Authorization Required)		
Alprazolam extended release (Prior Authorization Required)		
Alprazolam tablets and concentrate		
Chlordiazepoxide capsules		
Chlordiazepoxide – amitriptyline tablets		
Clonazepam tablets		
Diazepam rectal gel		
Chlorazepate dipotassium – all forms		
Diazepam tablets, concentrate, injectable		
Estazolam tablets		
Flurazepam capsules		
Lorazepam tablets, concentrate, injectable		
Midazolam syrup (Prior Authorization Required)		
Oxazepam capsules		
Oxazepam tablets (Prior Authorization Required)		
Quazepam tablets		
Temazepam capsules		
Triazolam tablets		

Prescription Vitamin and Minerals: (see <u>Medicaid Covered Over the Counter Drug List</u> for OTC Vitamins and Minerals)

B complex injection (Prior Authorization Required)		
B complex with vitamin C and folic acid capsules (Expedited Authorization Required)		
Cyanocobalamin injection 1000 mcg/ml		
Cyanocobalamin nasal gel (Prior Authorization Required)		
Ergocalciferol capsules		
Folic acid 1mg tablet		
Folic acid injectable		
Folic acid – B6 – B12 tablets 2.2/25/0.5mg		
Folic acid – B6 – B12 tablets 2.5/25/1mg		
Folic acid – B6 – B12 tablets 2.5/25/2mg		
Hydroxocobalamin injection 1000mcg/ml		
Phytonadione tablets and injection		
Pyridoxine hydrochloride injectable (Prior Authorization Required)		
Thiamine hydrochloride injectable (Prior Authorization Required)		
Vitamin A injection 50000unit/ml (Prior Authorization Required)		

Weight Gain:

The following products are covered when prescribed for weight gain:

Megestrol Acetate suspension	
Oxandralone tablets (Expedited Authoriza	tion required)